

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6/28/05</u>		2 Serial/Patent # <u>10/517573</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
<input checked="" type="checkbox"/>	Other <i>Search fee adjustment</i>			\$ 50							
		7 TOTAL AMOUNT OF REFUND		\$ 50							
10 REASON:		8 TO BE REFUNDED BY:									
	Overpayment	Treasury Check									
<input checked="" type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">2</td> <td style="width: 20px;">7</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> </tr> </table>			1	3	--	2	7	2	5
1	3	--	2	7	2	5					
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Kaya Lewis (Bathmae)</u>		TITLE: <u>Paralegal Specialist</u>									
SIGNATURE: <u><i>Kaya Lewis</i></u>		PHONE: <u>(703) 308-9140</u> <u>Ext 202</u>									
OFFICE: <u>DO/EO</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*